

## GOVERNMENT OF THE DISTRICT OF COLUMBIA OFFICE OF CAMPAIGN FINANCE WASHINGTON, D.C. 20003

REPORT OF RECEIPTS AND EXPENDITURES FOR CANDIDATES, PRINCIPAL CAMPAIGN OR POLITICAL COMMITTEES, POLITICAL ACTION COMMITTEES, INDEPENDENT EXPENDITURE COMMITTEES

#### SUMMARY PAGE

Full Name of Committee (Name of Candidate, if Candidate is reporting)     DC Proud 2019	2. OCF Identification Number INGMYR180006
Address 7927 Orchid Street, NW	3. Is this report an Amendment? (Yes or No)  ✓ Yes □ No
City, State and Zip Code Washington, DC 20012	

4. TYPE OF REPORT: Termination Report

This REPORT contains activity for: Not Applicable

SUMMARY  5. Covering Period 11/14/2018 through 3/15/2019	COLUMN A THIS PERIOD	COLUMN B CUMULATIVE TO-DATE
6. (a) Cash on Hand (January 31 Year End Report Only)		\$ 0.00
(b) Cash on Hand at Beginning of Reporting Period	\$ 278,028.33	
(c) Total Receipts [from Line (16)]	\$ 70,016.00	\$ 1,005,114.64
(d) Subtotal [add Lines 6(b) and 6(c) for Column A]	\$ 348,044.33	
7. Total Expenditures (from Line 22)	\$ 348,044.33	\$ 1,005,114.64
8. Cash on Hand at Close of Reporting Period [subtract Line 7 from Line 6(d)]	\$ 0.00	
9. Debts and Obligations Owed BY the Committee or the Candidate (itemize all on Schedule D)	\$ 0.00	\$ 0.00
10. (a) Loans Owed By the Committee to the Candidate (itemize all on Schedule E)	\$ 0.00	\$ 0.00
(b) Loans from other sources made to the Committee (itemize all on Schedule E-1)	\$ 0.00	\$ 0.00

CERTIFICATIONS/OATHS AND AFFIRMATIONS OF FILERS OF REPORTS OF RECEIPTS AND EXPENDITURES

#### (1) OATH OR AFFIRMATION OF CANDIDATE IF FILING

I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY, THAT I HAVE USED ALL REASONABLE DUE DILIGENCE TO PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE REPORT IS TRUE AND COMPLETE; AND I FURTHER SWEAR OR AFFIRM THAT I USED ALL REASONABLE DUE DILIGENCE TO ENSURE THAT I AND THE POLITICAL COMMITTEES AFFILIATED/AUTHORIZED BY MY CAMPAIGN ARE IN COMPLIANCE WITH THE REPORTING REQUIREMENTS OF THE DISTRICT OF COLUMBIA CAMPAIGN FINANCE ACT OF 2011, AND HAVE ADVISED ALL CONTRIBUTORS OF THE OBLIGATIONS IMPOSED ON CONTRIBUTORS BY THE CAMPAIGN FINANCE ACT.

TYPE OR PRINT FULL NAME OF CANDIDATE

SIGNATURE OF CANDIDATE DATE

	SUBSCRIBED AND SWORN TO BEFORE ME THIS THEDAYOF,20	
	NOTARY PUBLIC	
	NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION PENALTIES OF D.C. OFFICIAL CODE § 1-1163.35.	MAY SUBJECT THE PERSON TO THE
(2)	OATH OR AFFIRMATION OF COMMITTEE TREASURER	
	I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY THAT I HAVE TO PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, COMPLETE.	
	Ms. Jodi Ovca	
	TYPE OR PRINT FULL NAME OF TREASURER	
	ELECTRONICALLY CERTIFIED	08/23/2019
	SIGNATURE OF TREASURER	DATE
	SUBSCRIBED AND SWORN TO BEFORE ME THIS THEDAYOF,20	
	NOTARY PUBLIC	
	NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION PENALTIES OF D.C. OFFICIAL CODE § 1-1163.35.	MAY SUBJECT THE PERSON TO THE
(3)	OATH OR AFFIRMATION OF COMMITTEE TREASURER OF INDEPENDENT EXPENDITURE COMMITT	EE
	I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY THAT I HAVE TO PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE I FURTHER SWEAR OR AFFIRM THAT THE COMMITTEE HAS MADE NO CONTRIBUTI PUBLIC OFFICIAL OR CANDIDATE, ANY POLITICAL COMMITTEE, OR ANY POLITICAL ACTION CO	REPORT IS TRUE AND COMPLETE; AND ONS OR TRANSFER OF FUNDS TO ANY
	TYPE OR PRINT FULL NAME OF TREASURER	
	SIGNATURE OF TREASURER	DATE
	SUBSCRIBED AND SWORN TO BEFORE ME THIS THEDAYOF,20	
	NOTARY PUBLIC	

NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION MAY SUBJECT THE PERSON TO THE PENALTIES OF D.C. OFFICIAL CODE § 1-1163.35.

#### (4) OATH OR AFFIRMATION OF COMMITTEE TREASURER OF POLITICAL ACTION COMMITTEE

I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY THAT I HAVE USED ALL REASONABLE DUE DILIGENCE TO PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE REPORT IS TRUE AND COMPLETE; AND I FURTHER SWEAR OR AFFIRM THAT THE CONTRIBUTIONS RECEIVED BY THE COMMITTEE AND THE EXPENDITURES MADE HAVE NOT BEEN CONTROLLED OR DIRECTED BY ANY PUBLIC OFFICIAL OR CANDIDATE, ANY POLITICAL COMMITTEE, OR ANY POLITICAL PARTY.

TYPE OR PRINT FULL NAME OF TREASURER	
SIGNATURE OF TREASURER	DATE
SUBSCRIBED AND SWORN TO BEFORE ME THIS THEDAYOF,20	

#### NOTARY PUBLIC

NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION MAY SUBJECT THE PERSON TO THE PENALTIES OF D.C. OFFICIAL CODE § 1-1163.35.

# DETAILED SUMMARY PAGE OF RECEIPTS AND EXPENDITURES OCF Form 16, Page 2

Full Name of Committee (Name of Candidate, if Candidate is reporting)     DC Proud 2019		COVERING THE PERICE TO THE PER		5/2019	
I. RECEIPTS	COLUMN A TOTAL THIS PERIOD		COLUMN B CUMULATIVE T0-DATE CUMULATIVE YEAR-TO-DATE		
11. CONTRIBUTIONS (OTHER THAN LOANS) FROM:					
(a) Individuals/Organizations Other Than Political Committees (Schedule A)	\$	50,000.00	\$	822,598.64	11(a)
(b) Political Party Committees (Schedule A-1)	\$	0.00	\$	150,000.00	11(b)
(c) Political Committees Other than Pol. Comms. Authorized by the same Candidate (Schedule A-2)	8	0.00	\$	12,500.00	11(c)
(d) The Candidate (Schedule A-3)	\$	0.00	\$	0.00	11(d)
<ul> <li>(e) Transfers From Authorized Committees of the Candidate identified in this Report (Schedule A-4)</li> <li>(f) Itemized Monetary Contributions received in excess of \$10,000 from source not associated with the candidate or committee (Schedule A-7)</li> </ul>	\$ \$	20,016.00	s s	20,016.00	11(e) 11(f)
(g) Total Contributions (Other than Loans) [add lines 11(a), (b), (c), (d), (e) and (f)]	\$	70,016.00	\$	1,005,114.64	11(g)
12. SALES AND COLLECTIONS (Schedule C)	\$	0.00	\$	0.00	12
13. LOANS					
(a) Loans owed By the Committee to the Candidate (Schedule E)	\$	0.00	\$	0.00	13(a)
(b) Loans from other source made to the Committee (Schedule E-1)	\$	0.00	\$	0.00	13(b)
(c) Total Loans [add Lines 13(a) and (b)]	s	0.00	\$	0.00	13(c)
14. OTHER RECEIPTS (Dividends, Interest, etc.) (Schedule A-5)	\$	0.00	\$	0.00	14
15. OFFSETS TO OPERATING EXPENDITURES (Schedule A-6)	\$	0.00	\$	0.00	15
16. TOTAL RECEIPTS [add Lines 11(g), 12, 13(c), 14 and 15]	\$	70,016.00	\$	1,005,114.64	16
II. EXPENDITURES					
17. OPERATING EXPENDITURES (Schedule B)	\$	43,337.52	\$	700,407.83	17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES (Schedule B-1) 19. LOAN REPAYMENTS:	\$	284,706.81	\$	284,706.81	18
(a) Of Loans owed By the Committee to the Candidate (Schedule E)	\$	0.00	\$	0.00	19(a)
(b) Of Loans from other source made to the Committee (Schedule E-1)	s	0.00	\$	0.00	10(1-)
(c) Total Loan Repayments [add Lines 19(a) and 19(b)]  20. REFUNDS OF CONTRIBUTIONS TO:	\$	0.00	\$	0.00	19(b) 19(c)
(a) Individuals/Organizations Other Than Political Committees (Schedule B-2)	s	20,000.00	\$	20,000.00	20(a)
(b) Political Party Committees (Schedule B-3)	\$	0.00	\$	0.00	20(b)
(c) Other Political Committees and PACs (Schedule B-4)	s	0.00	\$	0.00	20(c)
(d) <b>Total Contribution Refunds</b> [add Lines 20(a), (b), and (c)]	s	20,000.00	\$	20,000.00	20(d)
21. OTHER EXPENDITURES		0.00		0.00	24()
(a) Independent Expenditures (Schedule B-5)	\$	0.00	\$	0.00	21(a)
(b) Offsets to Receipts (Schedule B-6)	\$	0.00	\$	0.00	21(b)
(c) Total Other Expenditures [add Lines 21(a), and 21(b)]	\$	0.00	\$	0.00	21(c)
22. TOTAL EXPENDITURES [add Lines 17, 18, 19(c), 20(d), and 21(c)]	\$	348,044.33	\$	1,005,114.64	22
III. CASH SUMMARY					
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$			278,028.33	3
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	s 70,016.00				
25. SUBTOTAL (add Lines 23 and 24)	\$			348,044.33	3
26. TOTAL EXPENDITURES THIS PERIOD (from Line 22)	\$			348,044.33	3
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	\$			0.00	0

### ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

Any information copied from such Reports or Stateme contributions, or for commercial purposes.	ents may not be sold or used by any person for the pur	pose of soliciting	
Full Name of Committee (Name of Candidate, if Candid DC Proud 2019	ate is reporting)		
Full Name, Mailing Address and Zip Code     American University      4400 Massachusetts Ave NW, Washington, DC     20016	Contribution Type  ☐ Cash ☐ Money Order ☐ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify)	Date (month, day, year) 02/15/2019	Amount of Each Receipt This Period \$ 10,000.00
Contributor Type Business	Occupation		
Business Type Corporation	Name and Address of Employer		
	Aggregate Year-To-date		\$ 10,000.00
2. Full Name, Mailing Address and Zip Code Ventruehouse Group LLC 1300 17th St N, Arlington, VA 22209	Contribution Type  ☐ Cash ☐ Money Order ☑ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify)	Date (month, day, year) 02/15/2019	Amount of Each Receipt This Period \$ 10,000.00
Contributor Type Business	Occupation  Name and Address of Employer		
Business Type Limited Liability Company	Name and Address of Employer		
Entitled Enablity Company	Aggregate Year-To-date		\$ 10,000.00
Full Name, Mailing Address and Zip Code     Sibley Memorial Hospital     5255 Loughboro rd nw, Washington, DC 20016	Contribution Type  ☐ Cash ☐ Money Order ☐ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify)	Date (month, day, year) 02/15/2019	Amount of Each Receipt This Period \$ 10,000.00
Contributor Type	Occupation Occupation		
Business  Business Type  Corporation	Name and Address of Employer		
	Aggregate Year-To-date		\$ 10,000.00
4. Full Name, Mailing Address and Zip Code Washigton Nationals Baseball Club LLC 1500 S Capitol St SE, Washington, DC 20003  Contributor Type Business	Contribution Type  ☐ Cash ☐ Money Order ☐ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify)  Occupation  Name and Address of Employer	Date (month, day, year) 02/15/2019	Amount of Each Receipt This Period \$ 10,000.00
Business Type Limited Liability Company			
	Aggregate Year-To-date		\$ 10,000.00
<ol> <li>Full Name, Mailing Address and Zip Code Amazon</li> <li>601 New Jersey Ave NW, Washington, DC 20001</li> </ol>	Contribution Type  ☐ Cash ☐ Money Order ☑ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify)	Date (month, day, year) 02/15/2019	Amount of Each Receipt This Period \$ 5,000.00
Contributor Type Business	Occupation  Name and Address of Employer		
Business Type Corporation	Traine and reduces of Employer		
	Aggregate Year-To-date		\$ 10,000.00

#### OCF FORM 16 SCHEDULE A Page 2 of 2 for Line Number 11a

#### ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

DC Proud 2019 6. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Via Tasnportation Inc  $\square$  Cash ☑ Check ☐ Money Order Receipt This Period day, year) ☐ Cashier Check ☐ Credit Card 95 Morton St Fl 3, New York, NY 10014 02/15/2019 \$ 5,000.00 ☐ Other (Specify) ☐ In Kind (Specify) **Contributor Type** Occupation Business Name and Address of Employer **Business Type** Corporation Aggregate Year-To-date \$ 5,000.00 **TOTAL This Period (Aggregate of all Receipt pages)** \$ 50,000.00 OCF FORM 16 SCHEDULE A-4 Page 1 of 1 for transfers from authorized committees of the candidate identified in this report for Line Number 11e

ll Name of Committee (Name of Candidate, if Ca	andidate is reporting)		
C Proud 2019	indidate is reporting)		
Full Name, Mailing Address and Zip Code Re Elect Muriel Bowser Our Mayor PO Box 90668, Washington, DC 20090	Contribution Type  ☐ Cash ☐ Money Order ☐ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☑ In Kind (Specify) Cashier Checks	Date (month, day, year) 03/15/2019	Amount of Each Receipt This Period \$ 20,016.00
	Aggregate Year-To-date		\$ 20,016.0
			,

TOTAL This Period (Aggregate of all expenditure pages)

\$ 43,337.52

## SCHEDULE B ITEMIZED OPERATING EXPENDITURES

te, if Candidate is reporting)		
Purpose of Expenditure Printing	Date (month, day, year)	Amount of Each Expenditure This Period \$ 41,165.52
Name and Address of Employer	02/04/2017	\$ 71,103.32
Purpose of Expenditure Consultant	Date (month, day, year)	Amount of Each Expenditure This Period
Name and Address of Employer DCPS 420 12th St SE, Washington, DC 20003	02/13/2019	\$ 1,100.00
Purpose of Expenditure Consultant	Date (month, day, year)	Amount of Each Expenditure This Period \$ 1,000.00
Name and Address of Employer	03/13/2019	\$ 1,000.00
Purpose of Expenditure Bank Fees	Date (month, day, year)	Amount of Each Expenditure This Period
Name and Address of Employer	03/15/2019	\$ 56.00
Purpose of Expenditure Bank Fees	Date (month, day, year)	Amount of Each Expenditure This Period
Name and Address of Employer	03/15/2019	\$ 16.00
·	Printing  Name and Address of Employer  Purpose of Expenditure  Consultant  Name and Address of Employer  DCPS  420 12th St SE, Washington, DC 20003  Purpose of Expenditure  Consultant  Name and Address of Employer  Purpose of Expenditure  Bank Fees  Name and Address of Employer  Purpose of Expenditure  Bank Fees	Printing (month, day, year)  02/04/2019  Name and Address of Employer  Purpose of Expenditure Consultant  Name and Address of Employer DCPS 420 12th St SE, Washington, DC 20003  Purpose of Expenditure Consultant  Date (month, day, year)  03/15/2019  Name and Address of Employer  Date (month, day, year)  03/15/2019  Purpose of Expenditure Bank Fees  Purpose of Expenditure  Purpose of Expenditure Bank Fees  Date (month, day, year)  03/15/2019  Date (month, day, year)  03/15/2019

## SCHEDULE B-1 TRANSFERS TO OTHER AUTHORIZED COMMITTEES

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions, or for commercial purposes.

#### FULL Name of Committee (Name of Candidate, if Candidate is reporting)

DC Proud 2019			
1. Full Name, Mailing Address and Zip Code Recreation WISH List Committee 701 Mississippi Ave SE, Washington, DC 20032	Purpose of Expenditure	Date (month, day, year)	Amount of Each Expenditure This Period
D 20002		03/15/2019	\$ 25,000.00
2. Full Name, Mailing Address and Zip Code Sasha Bruce 741 8th St SE, Washington, DC 20003	Purpose of Expenditure	Date (month, day, year)	Amount of Each Expenditure This Period
		03/15/2019	\$ 25,000.00
3. Full Name, Mailing Address and Zip Code  Mamatoto Villiage 311 47th St NE, Washington, DC	Purpose of Expenditure	Date (month, day, year)	Amount of Each Expenditure This Period
20019		03/15/2019	\$ 10,000.00
4. Full Name, Mailing Address and Zip Code Mayor Muriel Bowser's Constituent Service 1625 K St NW Ste 700, Washington, DC 20006	Purpose of Expenditure	Date (month, day, year)	Amount of Each Expenditure This Period
DC 20000		03/15/2019	\$ 199,706.81
5. Full Name, Mailing Address and Zip Code Emory Beacon Of Light 6120 Gerogia Ave NW, Washington,	Purpose of Expenditure	Date (month, day, year)	Amount of Each Expenditure This Period
DC 20011		03/15/2019	\$ 25,000.00

### OCF FORM 16 SCHEDULE B-2 Page 1 of 1 for Line Number 20a REFUNDS OF CONTRIBUTIONS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN POLITICAL COMMITTEES

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions, or for commercial purposes. FULL Name of Committee (Name of Candidate, if Candidate is reporting) DC Proud 2019 1. Full Name, Mailing Address and Zip Code Purpose of Expenditure Date Amount of Each Alta Gas (month, day, Expenditure This Period year) 1000 Maine Ave SW, Washington, DC 20024 03/15/2019 \$ 10,000.00 **Contributor Type** Business **Business Type** Corporation 2. Full Name, Mailing Address and Zip Code Purpose of Expenditure Date Amount of Each Exelon (month, day, Expenditure This Period 101 Constitution Ave NW Ste 400E, year) Washington, DC 20001 03/15/2019 \$ 10,000.00 **Contributor Type** Business **Business Type** Corporation \$ 20,000.00 TOTAL This Period (Aggregate of all expenditure pages)